		Filing Fee for a Fictitious Name \$40.00		
	LIMITED PARTNERSHIP			
	STATE OF MAINE			
BUSI	MENT OF INTENTION TO DO NESS UNDER AN ASSUMED OR FICTITIOUS NAME	Deputy Secretary of Secretary o		
	(Real Name of Limited Partnership)	Deputy Secretary of Secretary of Secretary Deputy Secretary of Secretary Deputy Secretary Of Secretary Deputy Secretary Of Secretary Deputy Secretary Deputy Secretary Of Secretary Deputy Secretary Deputy Secretary Of Secretary Deputy Secretary	tate	
	MRSA §405-A, the undersigned limited partnershiper an Assumed or Fictitious Name:	executes and delivers the following State	ment of Intention to do	
FIRST:	("X" one box only.)			
	assumed name (31 MRSA §405-A.1)	fictitious name (31 M	IRSA §405-A.2)	
	The limited partnership intends to transact business under the assumed or fictitious name of			
	A fictitious name is a name adopted by a foreign all name is unavailable pursuant to 31 MRSA §403-A		et business in this State	
Complete the	following if applicable:			
SECOND:				
	Additional locations are attached hereto as Exhibit, and made a part hereof.			
THIRD:	(Foreign Limited Partnership Only)			
	Jurisdiction of organization		and the date on which	
	the limited partnership was authorized to transact business in Maine			

DATED	
General Partner(s)*	
(signature)	(type or print name)
For General Partner(s) which are Entities	
Name of Entity	
By(authorized signature)	(type or print name and capacity)

The execution of this certificate constitutes an oath or affirmation under the penalties of false swearing under 17-A MRSA §453.

Please remit your payment made payable to the Maine Secretary of State.

<sup>\*</sup>Certificate **MUST** be signed by:

<sup>(1)</sup> at least one general partner OR

<sup>(2)</sup> any duly authorized person.